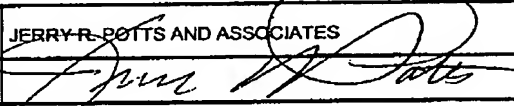


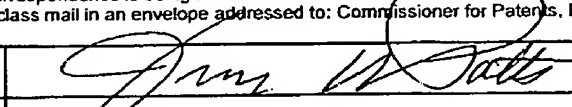
PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/751,128	RECEIVED CENTRAL FAX CENTER OCT 11 2004
	Filing Date	January 3, 2004	
	First Named Inventor	CLIFFORD A. WRIGHT	
	Art Unit	3743	
	Examiner Name	MITAL B. PATEL	
Total Number of Pages in This Submission	16	Attorney Docket Number	788118-1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FEE DETERMINATION RECORD
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	JERRY R. POTTS AND ASSOCIATES	
Signature		
Printed name	JERRY R. POTTS	
Date	OCTOBER 11, 2004	Reg. No. 27,091

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	JERRY R. POTTS
Date	OCTOBER 11, 2004

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PTO/SB/17 (10-04v2)

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 44.00)

Complete if Known

Application Number	10/751,128
Filing Date	January 3, 2004
First Named Inventor	CLIFFORD A. WRIGHT
Examiner Name	MITAL B. PATEL
Art Unit	3743
Attorney Docket No.	788116-1

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account:
 Deposit
Account
Number
Deposit
Account
Name

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments☐ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	4	20** = 4 x 11 = 44	44
Multiple Dependent		3** = 0 x 44 = 0	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 44	Independent claims in excess of 3
1203 300	2203 150	Multiple dependent claim, if not paid
1204 88	2204 44	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		

(\$ 44.00)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 430	2252 215	Extension for reply within second month	
1253 980	2253 490	Extension for reply within third month	
1254 1,530	2254 765	Extension for reply within fourth month	
1255 2,080	2255 1,040	Extension for reply within fifth month	
1401 340	2401 170	Notice of Appeal	
1402 340	2402 170	Filing a brief in support of an appeal	
1403 300	2403 150	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,370	2453 685	Petition to revive - unintentional	
1501 1,370	2501 685	Utility issue fee (or reissue)	
1502 490	2502 245	Design issue fee	
1503 660	2503 330	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1808 180	1808 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type) JERRY R. POTTS

Registration No. 27,091

(Complete if applicable)

Telephone 760-822-6201

Signature

Date OCTOBER 11, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0851-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number 788116-1	
Substitute for Form PTO-875							
CLAIMS AS FILED – PART I							
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE	RATE	FEE
BASIC FEE (37 CFR 1.16(a))					\$ 385		\$ _____
TOTAL CLAIMS (37 CFR 1.16(c))	20 minus 20 =	- 0		x \$ 0 =	0	x \$ _____ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3 minus 3 =	- 0		x \$ 0 =	0	x \$ _____ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL	\$ 385	TOTAL	
* If the difference in column 1 is less than zero, enter "0" in column 2.							
CLAIMS AS AMENDED – PART II							
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	OR OTHER THAN SMALL ENTITY
Total (37 CFR 1.16(c))	20	Minus	20	= 0	x \$ _____ =		x \$ _____ =
Independent (37 CFR 1.16(b))	4	Minus	3	= 1	x \$ 44 =	44.00	x \$ _____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	OR OTHER THAN SMALL ENTITY
Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ _____ =		x \$ _____ =
Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$ _____ =		x \$ _____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE	OR OTHER THAN SMALL ENTITY
Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ _____ =		x \$ _____ =
Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$ _____ =		x \$ _____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ _____ =		+ \$ _____ =	
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.							

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OCT 11 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Clifford A. Wright)	Art Unit: 3743
)	
Serial No.:	10/751,128)	Attorney
)	Docket No.: 788116-1
Filed:	January 3, 2004)	
)	
Title:	Divided Nasal Cannula Assembly)	
)	
)	

AMENDMENT

Mail Stop: Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attention: Examiner: Mital B. Patel
Phone No.: 703-306-5444

Dear Sir:

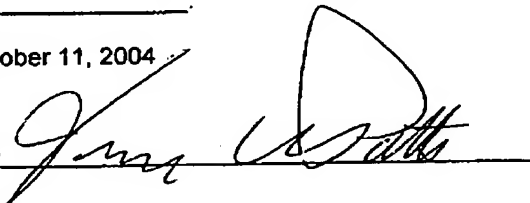
Responsive to the Office Action mailed September 22, 2004, please amend the above-identified patent application as follows:

CERTIFICATE OF TRANSMITTAL UNDER 37 C.F.R. § 1.8 (a)

I the undersigned, JERRY R. POTTS hereby certified that, on the date shown below, this correspondence is being facsimile transmitted to the United States Patent and Trademark Office or deposited with the United States Postal Service, addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No

Date: October 11, 2004

Signature



10/13/2004 AWONDAF1 00000016 10751128

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44.00 OP